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Form 3949 A	Department of the Treasu	ry – Internal Revenue Service			
(2-2007)		ion Referral	OMB # 1545-1	960	
1. Taxpayer Name D 1 2 Presingers Name					
· · · 1	leter Caspone	2. Bysiness Name	e Navans	,	
a. Street Address 3981 Robbs Ave		a. Street Address	220		
b. City/State/ZIPSanta Ynez CA 93460		b. City/State/ZIP			
c. Social Security Number (SSN)		c. Employer Identification	c. Employer Identification Number		
d. Occupation Accuracy		d. Principal Bus Activity	·		
e. Date of Birth					
3. Marital Status		3a. Name of Spouse		- Table 1	
☐ Married ☐ S	ingle Head of Household	os. Hamo of opouse			
☑Divorced □s		•			
- El Divolced [13	eparated		· · · · · · · · · · · · · · · · · · ·		
Alleged Violation of Income Tax Law (Check all that apply).					
False Exemption					
False Deductions		Unreported Income	☐ Failure to Withhold Tax		
		Narcotics Income	☐ Wagering/Gambling		
Multiple Filing	False/Altered Documents	Public/Political Corruption	☐ Earned Income Credit		
Organized Crime	Failure to Pay Tax	Fallure to File Return	Other (Describe below)		
5. Unreported Income and Tax Years (Fill in Tax Years and dollar amount(s), if known, e.g., TY2005 \$10,000)					
TV2(1014 15 N TV10)7 PU9 N TV					
1 TY \$ TY \$					
a. Comments (Briefly describe the facts of the alleged violation - Who/What/Where/When/How. Attach another sheet, if needed). Carbone a great to lend my company colden. LLC appears 7.5 H the sold various is allestate (a officionally in tary and a rithous real estate in California but lather than they to capital agins tox we asked to get up a promy 1031 tox five early to debut his tox the has the intermediary cive is the money and its agreed to any 12% amount interest in the land toxing the land interest to the land to the land to land					
b. Are books/record		c. Do you consider the tax	payer dangerous?		
	Institutions used by the taxpayer:	L 100 (2)140			
Name:		Name:			
Address:		Address:			
City/State/ZIP:		City/State/ZIP:			
e. Please describe how you learned and/or obtained the information in this report (Attach another sheet, if needed):					
J was a co-consolirator of house provided this into to tho US Atty for Englan District, Contract Islip but no action has					
6. Your Name: Mark Goldman					
c. Telephone Number (Please include the Area Code):					
For Mailing Address, see Instructions					
For Paperwork Reduction Act, see Instructions					

Catalog Number 47872E

Form 3949 A (Rev. 2-2007)

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